

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	6	6-26-01	
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
■	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
Final	8/5/
Original	14/3 21
1	10/20/01
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17	✓/M
18	✓/M
19	✓/M
20	✓
21	✓
22	✓
23	✓/V
24	✓/F
25	✓/V
26	✓/V
27	✓/D
28	✓/D
29	✓/V
30	✓/V
31	✓
32	✓/V
33	✓/V
34	✓/V
35	✓/V
36	✓/V
37	✓/V
38	✓/V
39	✓/V
40	✓
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Claim	Date
Final	✓/V
Original	51
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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